

DECLARATION FOR PATENT APPLICATION & POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

REDUCED CROSSTALK ULTRASOUND CABLE

the specification of which (check one)

X is attached hereto.

was filed on _____ as Application Serial No.
and was amended on _____ (if applicable).

List of Inventor(s): Timothy L. Proulx and Stuart Carp

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations § 1.56.

I hereby claim foreign priority benefits under Title 35, United States Codes, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S)

Priority claimed

(Number)	(Country)	(Day/month/year filed)	Yes	No

I hereby claim the benefits under Title 35, United States Code, § 120 of any United

States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

(Application Serial No.)	(Filing date)	(Status) (patented,pending,abandoned)
(Application Serial No.)	(Filing date)	(Status) (patented,pending,abandoned)

I hereby claim the benefit under 35 U.S.C. §119(e) of any United States **provisional** application listed below:

(Application Serial No.)	(Filing date)	(Status)
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Power of Attorney: As a named inventor, I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith/

Adel A. Ahmed, Reg. No. 29,606; I. Marc Asperas, Reg. No. 37,274; Stanton C. Braden, Reg. No. 32,556; Alexander J. Burke, Reg. No. 40,425; David D. Chung, Reg. No. 38,409; Joseph S. Codispoti, Reg. No. 31,819; Henry J. Groth, Reg. No. 39,696; Mark H. Jay, Reg. No. 27,507; Brian K. Johnson, Reg. No. 46,808; Stuart P. Kaler, Reg. No. 35,913; Rosa S. Kim, Reg. No. 39,728; Jenny G. Ko, Reg. No. 44,190; Peter A. Luccarelli Jr., Reg. No. 29,750; James M. Markarian, Reg. No. 31,277; Jeffrey P. Morris, Reg. No. 25,307; Pasquale Musacchio, Reg. No. 36,876; John Musone, Reg. No. 44,961; Frank J. Nuzzi, Reg. No. 42,944; Donald B. Paschburg, Reg. No. 33,753; Laura M. Slenzak, Reg. No. 35,363; Daniel J. Staudt, Reg. No. 34,733; Erik C. Swanson, Reg. No. 40,194; Heather S. Vance, Reg. No. 39,033; Michael J. Wallace, Reg. No. 44,486;

Send correspondence to:

Siemens Corporation
Intellectual Property Department
170 Wood Avenue South
Iselin, N.J. 08830

Direct telephone calls to:

Elsa Keller
Legal Administrator (732) 321-3026

I hereby declare that all statements made herein on my own knowledge are true and that all statements made on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like so made

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are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

Full name of [sole or joint] inventor: Timothy L. Proulx
Inventor's signature: 
Date: 8/29/03
Residence: 317 Effey St. Santa Cruz, CA 95062
Citizenship: U.S.A.
Post Office Address: 317 Effey St. Santa Cruz, CA 95062

Full name of [sole or joint] inventor: Stuart Carp
Inventor's signature: _____
Date: _____
Residence: _____
Citizenship: _____
Post Office Address: _____